

KANSAS MEDICAID STATE PLAN

V. METHODS

A. Arrangements for Early Identification of Individuals Under 21 Years of Age in Need of Medical or Remedial Services

All Rehabilitation Services clients who are under the age of 21 and eligible for Medicaid will be referred directly to local staff responsible for the Kan Be Healthy program.

B. Arrangements for Reciprocal Referrals

Methods and procedures for intraagency referrals between Rehabilitation Services staff and IM/MS staff will be worked out on the local level.

C. Coordinating Plans for Health Services Provided or Arranged for Recipients

The Rehabilitation Services and Division of Medical Programs will each designate a representative. These representatives will be responsible for (1) maintaining coordination between the two services, (2) assuring that communication is regular and timely, and (3) assuring that rates are coordinated and in a timely fashion.

D. Reimbursement for Services

1. Medicaid or MediKan will pay for all covered services (including durable medical equipment) that meet program criteria. These services may include such services as inpatient general hospitalization, wheelchairs, and other equipment, rehabilitation hospital services, diagnostic procedures and services and equipment not related to the handicapping condition. In all instances when clients are eligible and services are covered, Medicaid and MediKan will pay for the medical services. Claims for the services will be submitted to the Medicaid fiscal agent if the provider participates in the Kansas Medicaid Program. Claims for medical services provided by providers not participating in the Medicaid Program will be paid by Rehabilitation Services.

2. Rehabilitation Services' funds will be used to pay for prior authorized major medical services and equipment not covered by Medicaid or MediKan when a client is eligible for Rehabilitation services and when these services are part of the written rehabilitation plan. Equipment may include, but is not limited to, wheelchairs, beds, respiratory equipment, prostheses and braces, if needed to provide the client accessibility to training and/or employment. Services may include training in rehabilitation centers.

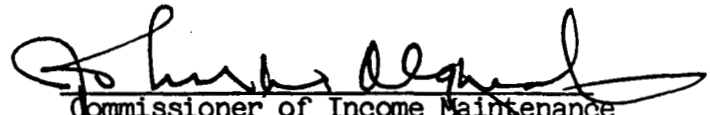
3. Rates of reimbursement to be used by both Rehabilitation Services and the Division of Medical Programs will be set by the Secretary of Social and Rehabilitation Services based upon recommendations of the Division of Medical Programs. Changes in the maximum allowable rates will be recommended to the Division of Medical Programs by Rehabilitation Services prior to budget preparation each year. Single rate recommendations will be made at least two months prior to the beginning of the state fiscal year.

KANSAS MEDICAID STATE PLAN

- E. Exchange of Reports of Services Provided to Recipients
Reports concerning services provided to recipients of both programs will be shared as they become available.
- F. Periodic Review and Joint Planning for Changes in the Agreements
This agreement will be reviewed on an annual basis. The review and joint planning for changes in this agreement will be held at least one month prior to the expiration date of this agreement.
- G. Continuous Liaison and Designation of Staff Responsible for Liaison Activities at State and Local Levels
Liaison will be maintained by the Commissioner of Rehabilitation Services and the Commissioner of Income Maintenance and Medical Services or their designees.
- H. Joint Evaluation of Policies that Affect the Cooperative Work of the Parties
Policies that affect cooperative work of both divisions will be jointly reviewed and signed off prior to implementation. Differences in policies will be resolved through joint discussion. Referral of issues which cannot be resolved will be referred to the Commissioners, who may refer these to the Secretary of the Department of Social and Rehabilitation Services if necessary.

This agreement becomes effective upon its approval by both divisions. This agreement may be terminated by written confirmation of both parties, or by sixty days termination notice by either party.


Commissioner of Rehabilitation
Services


Commissioner of Income Maintenance
and Medical Services

TN# MS-88-33 Approval Date 10/4/88 Effective Date 7/1/88 Supersedes TN# MS-85-6

KANSAS MEDICAID STATE PLAN

Attachment 4.16-A
MHRS/SRS
Page 1

**KANSAS DEPARTMENT OF SOCIAL AND REHABILITATION SERVICES
AGREEMENT BETWEEN INCOME SUPPORT AND MEDICAL SERVICES
AND
MENTAL HEALTH/RETARDATION SERVICES**

I. Mutual Objectives and Responsibilities

The purpose of this agreement is to satisfy federal requirements for cooperative agreements between Medicaid and the entity administering the services provided by state-owned acute inpatient psychiatric hospitals (IMDs), state-owned intermediate care facilities for the mentally retarded (ICFs/MR), nursing facilities for the mentally ill (NFs/MH) and Home and Community Based Services for the mentally retarded (HCBS/MR). This agreement is required to be in the Kansas Medicaid State Plan and is required for federal financial participation for the services provided to Medicaid eligible individuals in state-owned inpatient psychiatric hospitals and state-owned intermediate care facilities for the mentally retarded.

This agreement is between the Commission of Income Support and Medical Services (ISMS) and the Commission of Mental Health/Retardation Services (MHRS), both within the Kansas Department of Social and Rehabilitation Services which is the Single State Agency designated to administer the Medicaid Program under Title XIX of the Social Security Act. The terms of this agreement are subject to all federal terms, conditions and rules governing cooperative agreements under 42 CFR 431, Subpart M.

II. Services Each Party Offers and in What Circumstances

A. Responsibilities of MHRS

1. Develop and disseminate the admission criteria for individuals to a state-owned acute inpatient psychiatric hospital or state-owned ICF/MR facilities.
2. Provide for the Licensure, certification or other approval process for providers of service in state-owned acute inpatient psychiatric hospitals and state-owned ICFs/MR. MHRS will notify ISMS's fiscal agent of providers approved to deliver services and promptly notify ISMS's fiscal agent of any additions or deletions.
3. Establish program service requirements.
4. Develop and issue instructions through written ISMS manuals for SRS field staff pertaining to Medicaid/MediKan eligible individuals which include descriptions of determination of appropriate and integrated community services, procedures for admission, discharge and transfer.

JUN 15 1992

JUN 01 1992

TN#MS-92-13 Approval Date_____ Effective Date_____ Supersedes TN#Nothing

KANSAS MEDICAID STATE PLAN

Attachment 4.16-A
MHRS/SRS
Page 2

KANSAS DEPARTMENT OF SOCIAL AND REHABILITATION SERVICES

**AGREEMENT BETWEEN INCOME SUPPORT AND MEDICAL SERVICES
AND
MENTAL HEALTH/RETARDATION SERVICES**

5. Train local SRS staff in procedures required for determination of appropriate Home and Community Based Services for the Mentally Retarded (HCBS/MR) waiver services for Medicaid/MediKan eligible individuals.
6. Respond to questions and inquiries about IMDs, NF/MH, ICFs/MR, HCBS/MR services.
7. Request through the state budget process that state matching funds are available each year.
8. Notify the Medicaid fiscal agent of payment rates for Medicaid/MediKan providers of IMDS, NF/MH, ICF/MR and HCBS/MR services.
9. Develop MHRS program plans that impact cash, medical, or food stamp program operations in conjunction with appropriate IM/MS staff.
10. Sixty days prior to the stopping of payments, notify the Director of IM and the appropriate IM Chief when a ICF/MR or NF/MH facility has been decertified by the Department of Health and Environment.

B. Responsibilities of ISMS

1. ISMS will determine Medicaid/MediKan eligibility, at the local office level, for individuals applying for services.
2. ISMS will through its Medicaid fiscal agent:
 - a. enroll providers of services based upon criteria developed by MHRS.

JUN 15 1992 JUN 01 1992
TN#MS-92-13 Approval Date_____ Effective Date_____ Supersedes TN#Nothing

KANSAS MEDICAID STATE PLAN

Attachment 4.16-A
MHRS/SRS
Page 3

KANSAS DEPARTMENT OF SOCIAL AND REHABILITATION SERVICES

AGREEMENT BETWEEN INCOME SUPPORT AND MEDICAL SERVICES
AND
MENTAL HEALTH/RETARDATION SERVICES

- b. communicate with providers about the requirements of the Medicaid program, the nature of services and how to bill for services through bulletins, workshops and technical assistance.
 - c. process claims for reimbursement.
 - d. collect, and report data necessary to prudently administer, monitor and plan for budget expenditures.
- 3. Notify and coordinate with the fiscal agent to accurately and in a timely fashion produce any financial or statistical reports.
 - 4. Ensure a mechanism whereby federal financial participation may be claimed for services including administration of the Kansas Medicaid State Plan.
 - 5. Promptly advise MHRS of any federal questions or correspondence affecting state-owned inpatient psychiatric hospitals and ICFs/MR, NF/MHs, or HCBS/MR. ISMS will coordinate federal reviews (if any).

III. Mutual Responsibilities

ISMS and MHRS will:

- 1. Each designate staff persons for continuous liaison and coordination between the two commissions by areas of program responsibility.
- 2. Meet monthly for joint policy development, planning, coordinating, reviewing and evaluating trends and effectiveness.
- 3. Where applicable, annually determine funding levels and budget strategy.

TN#MS-92-13 Approval Date JUN 15 1992 Effective Date JUN 01 1992 Supersedes TN#Nothing

KANSAS MEDICAID STATE PLAN

Attachment 4.16-A
MHRS/SRS
Page 4

KANSAS DEPARTMENT OF SOCIAL AND REHABILITATION SERVICES

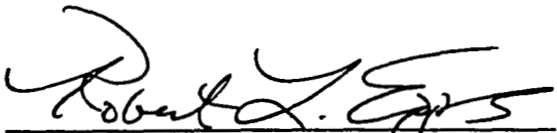
AGREEMENT BETWEEN INCOME SUPPORT AND MEDICAL SERVICES
AND
MENTAL HEALTH/RETARDATION SERVICES

4. Develop, maintain and share statistical data.
5. Jointly define and design Medicaid/MediKan programs including working with providers and other interested parties.
6. Devise payment structures for Medicaid/MediKan programs related to this agreement, based upon mutually agreed upon methodologies.
7. Devise and implement procedures for the early identification of individuals under the age of 21 in need of services, and promote the participation in the Kan Be Healthy (Early and Periodic Screening, Diagnosis and Treatment) program.
8. Develop and maintain procedures for reciprocal referrals.

IV. Agreement

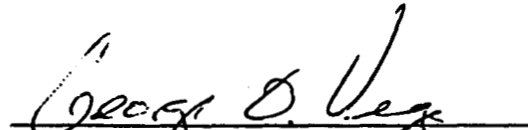
This agreement shall be in effect upon signature by the Commissioners of both Commissions, and is continuing in nature until such time as it is terminated by either party. This agreement shall be reviewed at least annually by the parties or whenever a major reorganization occurs. Any modification shall require new signing by both parties.

IN WITNESS THEREOF, THE PARTIES HERETO HAVE AFFIXED THEIR SIGNATURES.


Commissioner of Income Support and
Medical Services

Date

4/30/92


Acting Commissioner of Mental
Health and Retardation
Services

Date

5/11/92

TN#MS-92-13 Approval Date JUN 15 1992 Effective Date JUN 01 1992 Supersedes TN#Nothing

KANSAS DEPARTMENT OF SOCIAL AND REHABILITATION SERVICES
AGREEMENT BETWEEN INCOME SUPPORT AND MEDICAL SERVICES
AND
MENTAL HEALTH/RETARDATION SERVICES

I. Mutual Objectives and Responsibilities

The purpose of this agreement is to satisfy federal requirements for cooperative agreements between Medicaid and the entity administering the services provided by state-owned acute inpatient psychiatric hospitals (IMDs), state-owned intermediate care facilities for the mentally retarded (ICFs/MR), nursing facilities for the mentally ill (NFs/MH) and Home and Community Based Services for the mentally retarded (HCBS/MR). This agreement is required to be in the Kansas Medicaid State Plan and is required for federal financial participation for the services provided to Medicaid eligible individuals in state-owned inpatient psychiatric hospitals and state-owned intermediate care facilities for the mentally retarded.

This agreement is between the Commission of Income Support and Medical Services (ISMS) and the Commission of Mental Health/Retardation Services (MHRS), both within the Kansas Department of Social and Rehabilitation Services which is the Single State Agency designated to administer the Medicaid Program under Title XIX of the Social Security Act. The terms of this agreement are subject to all federal terms, conditions and rules governing cooperative agreements under 42 CFR 431, Subpart M.

II. Services Each Party Offers and in What Circumstances

A. Responsibilities of MHRS

1. Develop and disseminate the admission criteria for individuals to a state-owned acute inpatient psychiatric hospital or state-owned ICF/MR facilities.
2. Provide for the Licensure, certification or other approval process for providers of service in state-owned acute inpatient psychiatric hospitals and state-owned ICFs/MR. MHRS will notify ISMS's fiscal agent of providers approved to deliver services and promptly notify ISMS's fiscal agent of any additions or deletions.
3. Establish program service requirements.
4. Develop and issue instructions through written ISMS manuals for SRS field staff pertaining to Medicaid/MediKan eligible individuals which include descriptions of determination of appropriate and integrated community services, procedures for admission, discharge and transfer.
5. Train local SRS staff in procedures required for determination of appropriate Home and Community Based Services for the Mentally Retarded (HCBS/MR) waiver services for Medicaid/MediKan eligible individuals.
6. Respond to questions and inquiries about IMDs, NF/MH, ICFs/MR, HCBS/MR services.
7. Request through the state budget process that state matching funds are available each year.

8. Notify the Medicaid fiscal agent of payment rates for Medicaid/MediKan providers of IMDS, NF/MH, ICF/MR and HCBS/MR services.
9. Develop MHRS program plans that impact cash, medical, or food stamp program operations in conjunction with appropriate IM/MS staff.
10. Sixty days prior to the stopping of payments, notify the Director of IM and the appropriate IM Chief when a ICF/MR or NF/MH facility has been decertified by the Department of Health and Environment.

B. Responsibilities of ISMS

1. ISMS will determine Medicaid/MediKan eligibility, at the local office level, for individuals applying for services.
2. ISMS will through its Medicaid fiscal agent:
 - a. enroll providers of services based upon criteria developed by MHRS.
 - b. communicate with providers about the requirements of the Medicaid program, the nature of services and how to bill for services through bulletins, workshops and technical assistance.
 - c. process claims for reimbursement.
 - d. collect, and report data necessary to prudently administer, monitor and plan for budget expenditures.
3. Notify and coordinate with the fiscal agent to accurately and in a timely fashion produce any financial or statistical reports.
4. Ensure a mechanism whereby federal financial participation may be claimed for services including administration of the Kansas Medicaid State Plan.
5. Promptly advise MHRS of any federal questions or correspondence affecting state-owned inpatient psychiatric hospitals and ICFs/MR, NF/MHs, or HCBS/MR. ISMS will coordinate federal reviews (if any).

III. Mutual Responsibilities

ISMS and MHRS will:

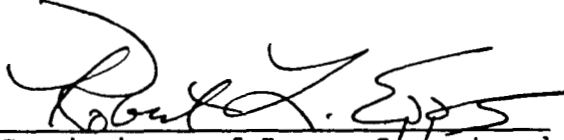
1. Each designate staff persons for continuous liaison and coordination between the two commissions by areas of program responsibility.
2. Meet monthly for joint policy development, planning, coordinating, reviewing and evaluating trends and effectiveness.
3. Where applicable, annually determine funding levels and budget strategy.
4. Develop, maintain and share statistical data.
5. Jointly define and design Medicaid/MediKan programs including working with providers and other interested parties.

6. Devise payment structures for Medicaid/MediKan programs related to this agreement, based upon mutually agreed upon methodologies.
7. Devise and implement procedures for the early identification of individuals under the age of 21 in need of services, and promote the participation in the Kan Be Healthy (Early and Periodic Screening, Diagnosis and Treatment) program.
8. Develop and maintain procedures for reciprocal referrals.

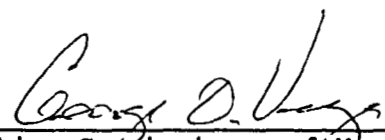
IV. Agreement

This agreement shall be in effect upon signature by the Commissioners of both Commissions, and is continuing in nature until such time as it is terminated by either party. This agreement shall be reviewed at least annually by the parties or whenever a major reorganization occurs. Any modification shall require new signing by both parties.

IN WITNESS THEREOF, THE PARTIES HERETO HAVE AFFIXED THEIR SIGNATURES.



Commissioner of Income Support and
Medical Services



Acting Commissioner of Mental
Health and Retardation
Services

Date 4/30/92

Date 5/11/92